

## State of North Carolina Department of Transportation Subcontractor Payment Information

Submit with Invoice To: Invoice Coordinator  
North Carolina Department of Transportation  
Division / Branch  
Address  
Raleigh, NC XXXXX-XXXX

Firm Invoice No. Reference \_\_\_\_\_  
NCDOT PO / Contract Number \_\_\_\_\_  
WBS No. (State Project No.) \_\_\_\_\_  
Date of Invoice \_\_\_\_\_  
Signed \_\_\_\_\_

Invoice Line Item Reference	Payer Name	Payer Federal Tax Id	Subcontractor / Subconsultant/ Material Supplier Name	Subcontractor / Subconsultant / Material Supplier Federal Tax Id	Amount Paid To Subcontractor / Subconsultant / Material Supplier This Invoice	Date Paid To Subcontractor / Subconsultant / Material Supplier This Invoice
<b>Total Amount Paid to Subcontractor Firms</b>					\$ _____	

**NOTE:** - These documents are scanned into our Fiscal program. Please do not highlight or shade the figures.

I certify that this information accurately reflects actual payments made and the dates the payments were made to Subcontractors/  
Subconsultants/Material Suppliers on the above referenced project.

Signature \_\_\_\_\_

Title \_\_\_\_\_